

<i>SERFF Tracking Number:</i>	<i>ZURC-125509643</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>Assurance Company of America, ...</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>CW-CR-26640</i>		
<i>TOI:</i>	<i>26.0 Burglary & Theft</i>	<i>Sub-TOI:</i>	<i>26.0001 Commercial Burglary & Theft</i>
<i>Product Name:</i>	<i>2008 Commercial Crime and Fidelity Form, Rate, Rule & Declaration Page Filing</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Filing at a Glance

Companies: Assurance Company of America, Northern Insurance Company of New York, Maryland Casualty Company, American Zurich Insurance Company, American Guarantee and Liability Insurance Company, Zurich American Insurance Company of Illinois, Zurich American Insurance Company

Product Name: 2008 Commercial Crime and Fidelity Form, Rate, Rule & Declaration Page Filing
 SERFF Tr Num: ZURC-125509643 State: Arkansas

TOI: 26.0 Burglary & Theft	SERFF Status: Closed	State Tr Num: EFT \$50
Sub-TOI: 26.0001 Commercial Burglary & Theft	Co Tr Num: CW-CR-26640	State Status: Fees verified and received
Filing Type: Form	Co Status: Not Applicable	Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
	Author: Roderick Veranga	Disposition Date: 03/10/2008
	Date Submitted: 03/04/2008	Disposition Status: Approved
Effective Date Requested (New): 09/01/2008		Effective Date (New): 09/01/2008
Effective Date Requested (Renewal): 09/01/2008		Effective Date (Renewal): 09/01/2008

State Filing Description:

General Information

Project Name:	Status of Filing in Domicile: Pending
Project Number:	Domicile Status Comments:
Reference Organization: ISO	Reference Number: CR-2006-OFR06
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 03/10/2008	
State Status Changed: 03/10/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	
Dear Property & Casualty Section:	

In accordance with the filing requirements of your state, please be advised that we wish to adopt the ISO revision listed

SERFF Tracking Number: ZURC-125509643 State: Arkansas
First Filing Company: Assurance Company of America, ... State Tracking Number: EFT \$50
Company Tracking Number: CW-CR-26640
TOI: 26.0 Burglary & Theft Sub-TOI: 26.0001 Commercial Burglary & Theft
Product Name: 2008 Commercial Crime and Fidelity Form, Rate, Rule & Declaration Page Filing
Project Name/Number: /

below:

- ISO Commercial Crime & Fidelity Multi-state forms revision reference filing number – CR-2006-OFR06

Due to the changes associated with the adoption of the above ISO references, we also wish to file for approval the ISO Declarations as mentioned in the attached explanatory memorandum.

We wish for an effective date of September1, 2008.

Should you have any questions regarding this filing, please feel free to contact me.

Sincerely,

Roderick Veranga

Business Analyst

Regulatory Services

Phone: (847) 413-3054

Fax: (847) 605-7768

Email: roderick.veranga@zurichna.com

Company and Contact

Filing Contact Information

Roderick Veranga, Business Analyst

1400 American Lane

Schaumburg, IL 60196

roderick.veranga@zurichna.com

(847) 413-3054 [Phone]

(847) 605-7768[FAX]

Filing Company Information

Assurance Company of America

1400 American Lane

Schaumburg, IL 60196

(847) 605-6000 ext. [Phone]

CoCode: 19305

Group Code: 212

Group Name:

FEIN Number: 13-6081895

State of Domicile: New York

Company Type:

State ID Number:

Northern Insurance Company of New York

CoCode: 19372

State of Domicile: New York

<i>SERFF Tracking Number:</i>	<i>ZURC-125509643</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>Assurance Company of America, ...</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>CW-CR-26640</i>		
<i>TOI:</i>	<i>26.0 Burglary & Theft</i>	<i>Sub-TOI:</i>	<i>26.0001 Commercial Burglary & Theft</i>
<i>Product Name:</i>	<i>2008 Commercial Crime and Fidelity Form, Rate, Rule & Declaration Page Filing</i>		
<i>Project Name/Number:</i>	<i>/</i>		

1400 American Lane Schaumburg, IL 60196 (847) 605-6000 ext. [Phone]	Group Code: 212 Group Name: FEIN Number: 13-5283360 -----	Company Type: State ID Number:
Maryland Casualty Company 1400 American Lane Schaumburg, IL 60196 (847) 605-6000 ext. [Phone]	CoCode: 19356 Group Code: 212 Group Name: FEIN Number: 52-0403120 -----	State of Domicile: Maryland Company Type: State ID Number:
American Zurich Insurance Company 1400 American Lane Schaumburg, IL 60196 (847) 605-6000 ext. [Phone]	CoCode: 40142 Group Code: 212 Group Name: FEIN Number: 36-3141762 -----	State of Domicile: Illinois Company Type: State ID Number:
American Guarantee and Liability Insurance Company 1400 American Lane Schaumburg, IL 60196 (847) 605-6000 ext. [Phone]	CoCode: 26247 Group Code: 212 Group Name: FEIN Number: 36-6071400 -----	State of Domicile: New York Company Type: State ID Number:
Zurich American Insurance Company of Illinois 1400 American Lane Schaumburg, IL 60196 (847) 605-6000 ext. [Phone]	CoCode: 27855 Group Code: 212 Group Name: FEIN Number: 36-2781080 -----	State of Domicile: Illinois Company Type: State ID Number:
Zurich American Insurance Company 1400 American Lane Schaumburg, IL 60102 (847) 605-6000 ext. [Phone]	CoCode: 16535 Group Code: 212 Group Name: FEIN Number: 36-4233459 -----	State of Domicile: New York Company Type: State ID Number:

SERFF Tracking Number: ZURC-125509643 State: Arkansas
 First Filing Company: Assurance Company of America, ... State Tracking Number: EFT \$50
 Company Tracking Number: CW-CR-26640
 TOI: 26.0 Burglary & Theft Sub-TOI: 26.0001 Commercial Burglary & Theft
 Product Name: 2008 Commercial Crime and Fidelity Form, Rate, Rule & Declaration Page Filing
 Project Name/Number: /

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? No
 Fee Explanation: State Fee is \$50
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Assurance Company of America	\$0.00	03/04/2008	
Northern Insurance Company of New York	\$0.00	03/04/2008	
Maryland Casualty Company	\$0.00	03/04/2008	
American Zurich Insurance Company	\$0.00	03/04/2008	
American Guarantee and Liability Insurance Company	\$0.00	03/04/2008	
Zurich American Insurance Company of Illinois	\$50.00	03/04/2008	18325386
Zurich American Insurance Company	\$0.00	03/04/2008	

SERFF Tracking Number: ZURC-125509643 State: Arkansas
First Filing Company: Assurance Company of America, ... State Tracking Number: EFT \$50
Company Tracking Number: CW-CR-26640
TOI: 26.0 Burglary & Theft Sub-TOI: 26.0001 Commercial Burglary & Theft
Product Name: 2008 Commercial Crime and Fidelity Form, Rate, Rule & Declaration Page Filing
Project Name/Number: /

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	03/10/2008	03/10/2008

SERFF Tracking Number: ZURC-125509643 State: Arkansas
First Filing Company: Assurance Company of America, ... State Tracking Number: EFT \$50
Company Tracking Number: CW-CR-26640
TOI: 26.0 Burglary & Theft Sub-TOI: 26.0001 Commercial Burglary & Theft
Product Name: 2008 Commercial Crime and Fidelity Form, Rate, Rule & Declaration Page Filing
Project Name/Number: /

Disposition

Disposition Date: 03/10/2008
Effective Date (New): 09/01/2008
Effective Date (Renewal): 09/01/2008
Status: Approved
Comment:

Rate data does NOT apply to filing.

Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing	0.000%
Overall Percentage Rate Impact For This Filing	0.000%
Effect of Rate Filing-Written Premium Change For This Program	\$0
Effect of Rate Filing - Number of Policyholders Affected	0

SERFF Tracking Number: ZURC-125509643 State: Arkansas
 First Filing Company: Assurance Company of America, ... State Tracking Number: EFT \$50
 Company Tracking Number: CW-CR-26640
 TOI: 26.0 Burglary & Theft Sub-TOI: 26.0001 Commercial Burglary & Theft
 Product Name: 2008 Commercial Crime and Fidelity Form, Rate, Rule & Declaration Page Filing
 Project Name/Number: /

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Filing Memorandum	Approved	Yes
Form	Crime and Fidelity Coverage Part Declarations (Commerical Entities)	Approved	Yes
Form	Commercial Crime Policy Declarations	Approved	Yes
Form	Crime and Fidelity Coverage Part Declarations (Government Entities)	Approved	Yes
Form	Government Crime Policy Declarations	Approved	Yes
Form	Employee Theft and Forgery Policy Declarations	Approved	Yes
Form	Kidnap/Ransom and Extortion Policy Declarations	Withdrawn	Yes
Form	Kidnap/Ransom and Extortion Coverage Part Declarations	Withdrawn	Yes

SERFF Tracking Number: ZURC-125509643 State: Arkansas

First Filing Company: Assurance Company of America, ... State Tracking Number: EFT \$50

Company Tracking Number: CW-CR-26640

TOI: 26.0 Burglary & Theft Sub-TOI: 26.0001 Commercial Burglary & Theft

Product Name: 2008 Commercial Crime and Fidelity Form, Rate, Rule & Declaration Page Filing

Project Name/Number: /

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Crime and Fidelity Coverage Part Declarations (Commerical Entities)	CR DS 01	08 07	Declaration Replaced s/Schedule	Replaced Form #:0.00 U-CR-D-104-B (07/05) Previous Filing #:		CR DS 01 08 07.pdf
Approved	Commercial Crime Policy Declarations	CR DS 02	08 07	Declaration Replaced s/Schedule	Replaced Form #:0.00 U-CR-D-105-A (05/02) Previous Filing #:		CR DS 02 08 07.pdf
Approved	Crime and Fidelity Coverage Part Declarations (Government Entities)	CR DS 03	08 07	Declaration Replaced s/Schedule	Replaced Form #:0.00 U-CR-D-106-A (05/02) Previous Filing #:		CR DS 03 08 07.pdf
Approved	Government Crime Policy Declarations	CR DS 04	08 07	Declaration Replaced s/Schedule	Replaced Form #:0.00 U-CR-D-108-A (05/02) Previous Filing #:		CR DS 04 08 07.pdf
Approved	Employee Theft and Forgery Policy Declarations	CR DS 05	08 07	Declaration Replaced s/Schedule	Replaced Form #:0.00 U-CR-D-109-A (05/02) Previous Filing #:		CR DS 05 08 07.pdf

POLICY NUMBER:

CRIME AND FIDELITY
CR DS 01 08 07

CRIME AND FIDELITY COVERAGE PART DECLARATIONS (COMMERCIAL ENTITIES)

The Crime And Fidelity Coverage Part (Commercial Entities) consists of this Declarations Form and the Commercial Crime Coverage Form.

Coverage Is Written:

☐

Primary

☐

Excess

☐

Coindemnity

☐

Concurrent

Employee Benefit Plan(s) Included As Insureds:

Insuring Agreements	Limit Of Insurance Per Occurrence	Deductible Amount Per Occurrence
1. Employee Theft	\$	\$
2. Forgery Or Alteration		
3. Inside The Premises – Theft Of Money And Securities		
4. Inside The Premises – Robbery Or Safe Burglary Of Other Property		
5. Outside The Premises		
6. Computer Fraud		
7. Funds Transfer Fraud		
8. Money Orders And Counterfeit Money		
If "Not Covered" is inserted above opposite any specified Insuring Agreement, such Insuring Agreement and any other reference thereto in this policy is deleted.		

If Added By Endorsement:

Insuring Agreement(s)	Limit Of Insurance Per Occurrence	Deductible Amount Per Occurrence
	\$	\$
Endorsements Forming Part Of This Coverage Part When Issued:		

Cancellation Of Prior Insurance Issued By Us:
By acceptance of this Coverage Part you give us notice cancelling prior policy Nos. ; the cancellation to be effective at the time this Coverage Part becomes effective.

Countersignature Of Authorized Representative
Name: Title: Signature: Date:

POLICY NUMBER:

CRIME AND FIDELITY
CR DS 02 08 07

COMMERCIAL CRIME POLICY DECLARATIONS

In Return For The Payment Of The Premium, And Subject To All The Terms And Conditions Of This Policy, We Agree With You To Provide The Insurance As Stated In This Policy.

Coverage Is Written:

☐

Primary

☐

Excess

☐

Coindemnity

☐

Concurrent

Company Name Area:
Producer Name Area:
Named Insured:
(Also list any Employee Benefit Plan(s) included as Insureds):
Mailing Address:
Policy Period
From:
To: 12:01 A.M. at your mailing address shown above.

Insurance Agreements	Limit Of Insurance Per Occurrence	Deductible Amount Per Occurrence
1. Employee Theft	\$	\$
2. Forgery Or Alteration		
3. Inside The Premises – Theft Of Money And Securities		
4. Inside The Premises – Robbery Or Safe Burglary Of Other Property		
5. Outside The Premises		
6. Computer Fraud		
7. Funds Transfer Fraud		
8. Money Orders And Counterfeit Money		
Coverage is provided only if an amount is shown opposite an Insuring Agreement. If the amount is left blank or "Not Covered" is inserted, such Insuring Agreement and any other reference thereto in this policy is deleted.		

If Added By Endorsement:		
Insuring Agreement	Limit Of Insurance Per Occurrence	Deductible Amount Per Occurrence
	\$	\$

Endorsements Forming Part Of This Policy When Issued:
--

Cancellation Of Prior Insurance Issued By Us:
By acceptance of this Policy you give us notice cancelling prior policy Nos. ; the cancellation to be effective at the time this Policy becomes effective.

Countersignature Of Authorized Representative
Name: Title: Signature: Date:

CRIME AND FIDELITY COVERAGE PART DECLARATIONS (GOVERNMENT ENTITIES)

The Crime And Fidelity Coverage Part (Government Entities) consists of this Declarations Form and the Government Crime Coverage Form.

Coverage Is Written:
☐

Primary

☐

Excess

☐

Coindemnity

☐

Concurrent

Insuring Agreements	Limit Of Insurance Per Occurrence	Deductible Amount Per Occurrence
1. Employee Theft – Per Loss Coverage	\$	\$
2. Employee Theft – Per Employee Coverage		
3. Forgery Or Alteration		
4. Inside The Premises – Theft Of Money And Securities		
5. Inside The Premises – Robbery Or Safe Burglary Of Other Property		
6. Outside The Premises		
7. Computer Fraud		
8. Funds Transfer Fraud		
9. Money Orders And Counterfeit Money		
If "Not Covered" is inserted above opposite any specified Insuring Agreement, such Insuring Agreement and any other reference thereto in this policy is deleted.		

If Added by Endorsement:

Insuring Agreement(s)	Limit Of Insurance Per Occurrence	Deductible Amount Per Occurrence
	\$	\$

Endorsements Forming Part Of This Coverage Part When Issued:

Cancellation Of Prior Insurance Issued By Us:
--

By acceptance of this Coverage Part you give us notice cancelling prior policy Nos.

; the cancellation to be effective at the time this Coverage Part becomes effective.
--

Countersignature Of Authorized Representative
--

Name:

Title:

Signature:

Date:

POLICY NUMBER:

CRIME AND FIDELITY
CR DS 04 08 07

GOVERNMENT CRIME POLICY DECLARATIONS

In Return For The Payment Of The Premium, And Subject To All The Terms And Conditions Of This Policy, We Agree With You To Provide The Insurance As Stated In This Policy.

Coverage Is Written:

☐

Primary

☐

Excess

☐

Coindemnity

☐

Concurrent

Company Name Area:

Producer Name Area:

Named Insured:

(Also list any Employee Benefit Plan(s) included as Insureds):

Mailing Address:

Policy Period

From:

To: 12:01 A.M. at your mailing address shown above.

Insuring Agreements	Limit Of Insurance Per Occurrence	Deductible Amount Per Occurrence
1. Employee Theft – Per Loss Coverage	\$	\$
2. Employee Theft – Per Employee Coverage		
3. Forgery Or Alteration		
4. Inside The Premises – Theft Of Money And Securities		
5. Inside The Premises – Robbery Or Safe Burglary Of Other Property		
6. Outside The Premises		
7. Computer Fraud		
8. Funds Transfer Fraud		
9. Money Orders And Counterfeit Money		
If "Not Covered" is inserted above opposite any specified Insuring Agreement, such Insuring Agreement and any other reference thereto in this policy is deleted.		

POLICY NUMBER:

CRIME AND FIDELITY
CR DS 05 08 07

EMPLOYEE THEFT AND FORGERY POLICY DECLARATIONS

In Return For The Payment Of The Premium, And Subject To All The Terms And Conditions Of This Policy, We Agree With You To Provide The Insurance As Stated In This Policy.

Coverage Is Written:

☐

Primary

☐

Excess

☐

Coindemnity

☐

Concurrent

Company Name Area:

Producer Name Area:

Named Insured:

(Also list any Employee Benefit Plan(s) included as Insureds):

Mailing Address:

Policy Period

From:

To:

12:01 A.M. at your mailing address shown above.

Insuring Agreements		Limit Of Insurance Per Occurrence	Deductible Amount Per Occurrence
1.	Employee Theft	\$	\$
2.	Forgery Or Alteration		
If "Not Covered" is inserted above opposite any specified Insuring Agreement, such Insuring Agreement and any other reference thereto in this policy is deleted.			

If Added By Endorsement:

Insuring Agreement(s)	Limit Of Insurance Per Occurrence	Deductible Amount Per Occurrence
	\$	\$

Cancellation Of Prior Insurance Issued By Us:
--

By acceptance of this Policy you give us notice cancelling prior policy Nos.
--

; the cancellation to be effective at the time this Policy becomes effective.

Countersignature Of Authorized Representative
--

Name:

Title:

Signature:

Date:

<i>SERFF Tracking Number:</i>	<i>ZURC-125509643</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>Assurance Company of America, ...</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>CW-CR-26640</i>		
<i>TOI:</i>	<i>26.0 Burglary & Theft</i>	<i>Sub-TOI:</i>	<i>26.0001 Commercial Burglary & Theft</i>
<i>Product Name:</i>	<i>2008 Commercial Crime and Fidelity Form, Rate, Rule & Declaration Page Filing</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: ZURC-125509643 State: Arkansas
First Filing Company: Assurance Company of America, ... State Tracking Number: EFT \$50
Company Tracking Number: CW-CR-26640
TOI: 26.0 Burglary & Theft Sub-TOI: 26.0001 Commercial Burglary & Theft
Product Name: 2008 Commercial Crime and Fidelity Form, Rate, Rule & Declaration Page Filing
Project Name/Number: /

Supporting Document Schedules

		Review Status:	
Satisfied -Name:	Uniform Transmittal Document-Property & Casualty	Approved	03/10/2008

Comments:

Attachment:

P&C Transmittal.pdf

		Review Status:	
Satisfied -Name:	Filing Memorandum	Approved	03/10/2008

Comments:

Attachment:

EXPLANATORY Form & DEC MEMORANDUM Crime Filing 2.pdf

Property & Casualty Transmittal Document (Revised 1/1/06)


1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only	
	a. Date the filing is received:	
	b. Analyst:	
	c. Disposition:	
	d. Date of disposition of the filing:	
	e. Effective date of filing:	
	New Business	
	Renewal Business	
	f. State Filing #:	
	g. SERFF Filing #:	
h. Subject Codes		

3. Group Name	Group NAIC #
Zurich North America	212

4. Company Name(s)	Domicile	NAIC #	FEIN #
Zurich American Insurance Company	NY	16535	36-4233459
American Guarantee and Liability Insurance Company	NY	26247	36-6071400
American Zurich Insurance Company	IL	40142	36-3141762
Zurich American Insurance Company Illinois	IL	27855	36-2781080
Northern Insurance Company of New York	NY	19372	13-5283360
Assurance Company of American	NY	19305	13-6081895
Maryland Casualty Company	MD	19356	52-0403120

5. Company Tracking Number	CW-CR-26640
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6. Name and address	Title	Telephone #s	FAX #	e-mail
Roderick Veranga 1400 American Lane Schaumburg, IL 60196-1056	Business Analyst	847-413-3054	847-605-7768	Roderick.veranga@zurichna.com
7. Signature of authorized filer				
8. Please print name of authorized filer		Roderick Veranga		

Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	Burglary and Theft
10. Sub-Type of Insurance (Sub-TOI)	26.0
11. State Specific Product code(s) (if applicable)[See State Specific Requirements]	26.0
12. Company Program Title (Marketing title)	2008 ISO Crime Form, Loss Costs and Rule Adoption
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input checked="" type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other
14. Effective Date(s) Requested	New: 09-01-2008 Renewal: 09-01-2008
15. Reference Filing?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16. Reference Organization (if applicable)	ISO
17. Reference Organization # & Title	CR-2007-RLA1, CR-2006-ORU06, CR-2006-OFR06, & CR-2006-RLC06

18. Company's Date of Filing	March 4, 2008
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20. This filing transmittal is part of Company Tracking #	CW-CR-26640
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21. Filing Description [This area should be similar to the body of a cover letter and is free-form text]

Dear Property & Casualty Section:

In accordance with the filing requirements of your state, please be advised that we wish to adopt the various ISO revisions listed below:

- ISO Commercial Crime & Fidelity loss costs reference filing number – CR-2006-RLC06
- ISO Commercial Crime & Fidelity Multi-state rules revision reference filing number – CR-2006-ORU06
- ISO Commercial Crime & Fidelity Multi-state forms revision reference filing number – CR-2006-OFR06

Due to the changes associated with the adoption of the above ISO references, we also wish to file for approval the ISO Declarations and our Company Specific Rules as mentioned in the attached explanatory memorandum.

Last it is our intention to delay adoption ISO Prospective Advisory Loss Cost Revision associated with ISO's Filing Designation Number CR-2007-RLA1 to September 1, 2008.

We wish to effective date of September 1, 2008.

Should you have any questions regarding this filing, please feel free to contact me.

Sincerely,



Roderick Veranga
Business Analyst
Regulatory Services
Phone: (847) 413-3054
Fax: (847) 605-7768
Email: roderick.veranga@zurichna.com

22. Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]

Check #:
Amount: \$50

Forms \$50 Sent EFT

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

*****Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**

Commercial Crime & Fidelity Explanatory Memorandum

Adoption of ISO Commercial Crime and Fidelity Form and Declaration Pages

ISO Commercial Crime and Fidelity Form

It is our intent to adopt ISO's Multistate revisions to the Commercial Crime and Fidelity Forms and Endorsements Pages as referred to in ISO's Filing Designation Number CR-2006-OFR06.

Declaration Pages

It is also our intent to adopt the following ISO Advisory Declaration Pages:

Form Number/ Title	Replaces Form Number/Title
CR DS 01 08 07/ Crime and Fidelity Coverage Part Declarations (Commercial Entities)	U-CR-D-104-B (07/05) / Commercial Crime Coverage Part Declarations
CR DS 02 08 07 / Commercial Crime Policy Declarations	U-CR-D-105-A (05/02) / Commercial Crime Policy Declarations
CR DS 03 08 07/ Crime and Fidelity Coverage Part Declarations (Government Entities)	U-CR-D-106-A (05/02) / Government Crime Coverage Part Declarations
CR DS 04 08 07 / Government Crime Policy Declarations	U-CR-D-108-A (05/02) / Government Crime Policy Declarations
CR DS 05 08 07 / Employee Theft and Forgery Policy Declarations	U-CR-D-109-A (05/02) / Employee Theft and Forgery Policy Declarations

At this time, we would also like to withdraw the following Declaration Pages

Form Number	Title
U-CR-D-115-A CW (10/02)	Kidnap / Ransom and Extortion Policy Declarations
U-CR-D-116-A CW (10/02)	Kidnap / Ransom and Extortion Coverage Part Declarations